

United States of America  
Department of Transportation—Federal Aviation Administration  
**Supplemental Type Certificate**

*Number*

SA8119SW 190-1805  
WCA

*This certificate, issued to* Elsinore Aerospace Systems, Inc.  
Airline Drive-Bldg 11-4  
Waco, Texas 76705

*certifies that the change in the type design for the following product with the limitations and conditions therefor as specified hereon meets the airworthiness requirements of Part 4B of the CAR Regulations.*

*Original Product—Type Certificate Number:* 4A25  
*Make:* McDonnell Douglas  
*Model:* DC-8-71

*Description of Type Design Change:*

Provisions for seatfone installation in modified Jepson Burns Seats in accordance with Elsinore Aerospace Systems drawing list 10021-2520-000, Rev. A, dated September 26, 1991, or later FAA approved revision.

*Limitations and Conditions:*

Compatibility of this modification with previously installed equipment must be determined by installer.

*This certificate and the supporting data which is the basis for approval shall remain in effect until surrendered, suspended, revoked, or a termination date is otherwise established by the Administrator of the Federal Aviation Administration.*

*Date of application:* September 12, 1991 *Date reissued:*

*Date of issuance:* October 17, 1991 *Date amended:*



*By direction of the Administrator*

*Mark R. Schilling*  
(Signature)  
Mark R. Schilling, Manager  
Special Certification Office

(Title)

Any alteration of this certificate is punishable by a fine of not exceeding \$1,000, or imprisonment not exceeding 3 years, or both.

INSTRUCTIONS: The transfer endorsement below may be used to notify the appropriate FAA Regional Office of the transfer of this Supplemental Type Certificate.

The FAA will reissue the certificate in the name of the transferee and forward it to him.

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### TRANSFER ENDORSEMENT

Transfer the ownership of Supplemental Type Certificate Number \_\_\_\_\_

to *(Name of transferee)* \_\_\_\_\_

*(Address of transferee)* \_\_\_\_\_  
*(Number and street)*

\_\_\_\_\_  
*(City, State, and ZIP code)*

from *(Name of grantor)* *(Print or type)* \_\_\_\_\_

*(Address of grantor)* \_\_\_\_\_  
*(Number and street)*

\_\_\_\_\_  
*(City, State, and ZIP code)*

Extent of Authority (if licensing agreement): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date of Transfer: \_\_\_\_\_

Signature of grantor *(In ink)*: \_\_\_\_\_